Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Silvia First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Orozco Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Last Haine and Sullix (St., St., II, III)	Last hame and Sumx (St., St., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5350	

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 2 of 53

Case number (if known)

Debtor 1 Silvia A Orozco

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINS	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		4200 Deyo Ave	
		Brookfield, IL 60513 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	·
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Entered 04/08/16 20:18:24 Desc Main Page 3 of 53 Case 16-12135 Doc 1 Filed 04/08/16

Document Case number (if known) Debtor 1 Silvia A Orozco

7.	The chapter of the Bankruptcy Code you are			rief description of each, see <i>Notice Required</i> go to the top of page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy riate box.
	choosing to file under	■ Cha	apter 7		
		☐ Cha	apter 11		
		☐ Cha	apter 12		
		☐ Cha	apter 13		
В.	How you will pay the fee	— а о	bout how yo	u may pay. Typically, if you are paying the fe attorney is submitting your payment on your	heck with the clerk's office in your local court for more details e yourself, you may pay with cash, cashier's check, or money pehalf, your attorney may pay with a credit card or check with
		_ ı	need to pay		option, sign and attach the Application for Individuals to Pay
		□ I b a	request that out is not requipplies to you	t my fee be waived (You may request this of uired to, waive your fee, and may do so only in Ir family size and you are unable to pay the fe	otion only if you are filing for Chapter 7. By law, a judge may, f your income is less than 150% of the official poverty line that ee in installments). If you choose this option, you must fill out
		th	ne <i>Applicatio</i>	n to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the last 8 years?	■ No.			
			District	When	Case number
			District	When	Case number
			District	When	Case number
0.	Are any bankruptcy cases pending or being	■ No			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
			Debtor		Relationship to you
			District	When	Case number, if known
			Debtor		Relationship to you
			District	When	Case number, if known
11.	Do you rent your residence?	■ No.	Go to I	ne 12.	
		☐ Yes.	Has yo	ur landlord obtained an eviction judgment ag	ainst you and do you want to stay in your residence?
				No. Go to line 12.	
				Yes. Fill out Initial Statement About an Evict.	

Debtor 1 Silvia A Orozco Document Page 4 of 53 Case number (if known)

Par	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Checi	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl .C. 1116(dicate that you are ow statement, and f 1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	I am r	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any							
	property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

Debtor 1 Silvia A Orozco Document Page 5 of 53 Case number (if known)

Part 5: Exp

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 Silvia A Orozco **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Silvia A Orozco Signature of Debtor 2 Silvia A Orozco Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on April 8, 2016

MM / DD / YYYY

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 7 of 53

Debtor 1 Silvia A Orozco Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rayed Yasin	Date	April 8, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
Rayed Yasin		
Printed name		
VLO, P.C.		
Firm name		
3818 S. Harlem Ave.		
Lyons, IL 60534		
Number, Street, City, State & ZIP Code		
Contact phone 3126007000	Email address	
6284297		
Bar number & State		

		DOCUM	<u>eni Pade 8 0153</u>	
Fill in this info	rmation to identify your	case:		
Debtor 1	Silvia A Orozco			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this
,				amended filii

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

•			
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	183,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,062.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	207,062.00
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	247,687.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,630.69
	Your total liabilities	\$	283,317.69
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,831.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,905.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Case 16-12135 Doc 1 Document

Page 9 of 53 Case number (if known) Debtor 1 Silvia A Orozco

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,480.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case			1 1/1//	ument						
ill in this informat	ion to identify you	ır case and th			Page 10 of 5					
Debtor 1	Silvia A Orozco									
_	First Name	Middle	e Name		Last Name					
Debtor 2 Spouse, if filing)	First Name	Middle	e Name		Last Name					
0,										
Inited States Bankr	uptcy Court for the:	NORTHER	N DISTI	RICT OF ILLIN	NOIS					
Case number										Check if this is a
					_					amended filing
Official Forn Schedule each category, sepaink it fits best. Be as formation. If more sp	A/B: Proparately list and descriss complete and accupace is needed, attac	ibe items. List a	le. If two	married people	e are filing together, l	both are eq	ually respons	sible for su	pplyir	ng correct
nswer every question	n.	·					•			, ,
art 1: Describe Eac	ch Residence, Buildir	ng, Land, or Ot	her Real	Estate You Ow	n or Have an Interes	st In				
	e any legal or equital	ble interest in a	ny reside	ence, building,	land, or similar prop	perty?				
☐ No. Go to Part 2.										
Yes. Where is the	e property?									
Yes. Where is the	e property?		What	is the property	1? Check all that apply					
Yes. Where is the			What		1? Check all that apply	ļ	Do not deduct	secured cls	aims o	r exemntions. Put
Yes. Where is the 4200 Deyo A		on .	•	is the property Single-family h Duplex or mul	nome	t	he amount of	any secure	d clain	r exemptions. Put ns on <i>Schedule D:</i>
Yes. Where is the 4200 Deyo A	ve	on .	■	Single-family h	nome	t	he amount of	any secure	d clain	
Yes. Where is the 4200 Deyo A	ve	on .	•	Single-family h	nome ti-unit building or cooperative	t	he amount of	any secure	d clain	ns on Schedule D:
Yes. Where is the 4200 Deyo A Street address, if av	. Ve railable, or other descriptio			Single-family h Duplex or mul Condominium Manufactured	nome ti-unit building	t	he amount of a Creditors Who Current value	any secured Have Clain	d claim ns Sed Cur	ns on Schedule D: cured by Property.
Yes. Where is the 4200 Deyo A Street address, if av Brookfield	ve railable, or other description	0513-0000	■	Single-family h Duplex or mul Condominium Manufactured Land	nome ti-unit building or cooperative or mobile home	t	he amount of Creditors Who Current value entire propert	any secured Have Clair of the y?	d claim ns Sed Cur	ns on Schedule D: cured by Property. rent value of the tion you own?
Yes. Where is the 4200 Deyo A Street address, if av	. Ve railable, or other descriptio			Single-family h Duplex or mul Condominium Manufactured Land Investment pro	nome ti-unit building or cooperative or mobile home	(6	he amount of a Creditors Who Current value entire propert \$183,0	any secured Have Claim of the y?	d claim ms Sec Cur port	ns on Schedule D: cured by Property. rent value of the tion you own? \$183,000.0
Yes. Where is the 4200 Deyo A Street address, if av	ve railable, or other description	0513-0000		Single-family h Duplex or mul Condominium Manufactured Land	nome ti-unit building or cooperative or mobile home	(e	he amount of a Creditors Who Current value entire propert \$183,0	of the y? 000.00 nature of y	d claim ms Sec Cur port	rent value of the tion you own? \$183,000.0
Yes. Where is the 4200 Deyo A Street address, if av	ve railable, or other description	0513-0000		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other	nome ti-unit building or cooperative or mobile home	i (he amount of a Creditors Who Current value entire propert \$183,0	of the y? 000.00 nature of ysimple, tens	d claim ms Sec Cur port	ns on Schedule D: cured by Property. rent value of the tion you own? \$183,000.0
Yes. Where is the 4200 Deyo A Street address, if av Brookfield City	ve railable, or other description	0513-0000		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other	nome ti-unit building or cooperative or mobile home	i (he amount of a Creditors Who Current value entire propert \$183,0 Describe the isuch as fee s	of the y? 000.00 nature of ysimple, tens	d claim ms Sec Cur port	rent value of the tion you own? \$183,000.0
Yes. Where is the 4200 Deyo A Street address, if av	ve railable, or other description	0513-0000		Single-family h Duplex or mul Condominium Manufactured Land Investment pro Timeshare Other has an interest	nome ti-unit building or cooperative or mobile home	i (he amount of a Creditors Who Current value entire propert \$183,0 Describe the isuch as fee s	of the y? 000.00 nature of ysimple, tens	d claim ms Sec Cur port	rent value of the tion you own? \$183,000.0
Yes. Where is the 4200 Deyo A Street address, if av Brookfield City	ve railable, or other description	0513-0000		Single-family h Duplex or mul Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only	nome ti-unit building or cooperative or mobile home operty in the property? Che	t ((eck one	he amount of a Creditors Who Current value entire propert \$183, Describe the issuch as fee so a life estate), is	of the y? 000.00 nature of y simple, tensif known.	Cur port	rent value of the tion you own? \$183,000.0 wnership interest by the entireties, o
Yes. Where is the 4200 Deyo A Street address, if av Brookfield City Cook	ve railable, or other description	0513-0000		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and I At least one of	nome ti-unit building or cooperative or mobile home operty in the property? Che Debtor 2 only if the debtors and anoth	t ((eck one	Current value entire propert \$183,00 Describe the such as fee sa life estate), in the control of	of the y? 000.00 nature of y simple, tensif known.	Cur port	rent value of the tion you own? \$183,000.0
Yes. Where is the 4200 Deyo A Street address, if av Brookfield City Cook	ve railable, or other description	0513-0000		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and I At least one of	nome ti-unit building or cooperative or mobile home operty in the property? Che Debtor 2 only if the debtors and anoth ou wish to add about	t ((eck one	Current value entire propert \$183,00 Describe the such as fee sa life estate), in the control of	of the y? 000.00 nature of y simple, tensif known.	Cur port	rent value of the tion you own? \$183,000.0 wnership interest by the entireties, o
Yes. Where is the 4200 Deyo A Street address, if av Brookfield City Cook	ve railable, or other description	0513-0000	Who I	Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and I At least one of	nome ti-unit building or cooperative or mobile home operty in the property? Che Debtor 2 only if the debtors and anoth ou wish to add about	t ((eck one	Current value entire propert \$183,00 Describe the such as fee sa life estate), in the control of	of the y? 000.00 nature of y simple, tensif known.	Cur port	rent value of the tion you own? \$183,000.0 wnership interest by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$183,000.00

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Page 11 of 53
Case number (if known) Document Debtor 1 Silvia A Orozco 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mazda Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: 3 Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2015 Year: Debtor 2 only Current value of the Current value of the 11000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$15,000.00 \$15,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Pontiac** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Grand Prix** Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2004 Year: Debtor 2 only Current value of the Current value of the 80000 portion you own? Approximate mileage: Debtor 1 and Debtor 2 only entire property? Other information: At least one of the debtors and another Car was awarded to ex-husband \$2,500.00 \$2,500.00 in divorce judgment, however it ☐ Check if this is community property (see instructions) is still titled in debtor's name. 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$17,500.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$300.00 General items of household goods and furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

Page 12 of 53

Case number (if known) Document Debtor 1 Silvia A Orozco 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$250.00 Gerneral items of wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$550.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes..... Cash \$150.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **PNC** \$456.00

Official Form 106A/B Schedule A/B: Property page 3

17.1. Checking

Case 16-12135

Doc 1

Filed 04/08/16

Entered 04/08/16 20:18:24

Desc Main

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Page 13 of 53
Case number (if known) Document

Debtor 1 Silvia A Orozco 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: Pension **Aon Hewitt** \$2.506.00 \$1,300.00 401(k) **Putnam** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: Yes. Rental deposit **World Investment Co Inc** \$1,600.00 28 East Ave Riverside, IL 60546 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them...

Debtor 1	Silvia A Orozco	Document	Page 14 of 5	Case number (if known)	
					portion you own? Do not deduct secured claims or exemptions.
■ No	funds owed to you Give specific information about them	including whether you alre	eady filed the returns	and the tay years	
□ 1es.	Give specific information about them	, including whether you alle	ady filed the returns	and the tax years	
■ No	r support ples: Past due or lump sum alimony, s Give specific information	spousal support, child supp	ort, maintenance, di	vorce settlement, property	settlement
<i>Exam</i> ■ No	amounts someone owes you ples: Unpaid wages, disability insuran benefits; unpaid loans you made		efits, sick pay, vaca	tion pay, workers' compen	sation, Social Security
	Give specific information sts in insurance policies				
	ples: Health, disability, or life insurance	ce; health savings account (HSA); credit, homeo	owner's, or renter's insuran	ce
	Name the insurance company of eac Company nam		Benefi	ciary:	Surrender or refund value:
If you some	terest in property that is due you from are the beneficiary of a living trust, expone has died. Give specific information			re currently entitled to rece	ive property because
Exam ■ No	s against third parties, whether or r ples: Accidents, employment disputes Describe each claim			nd for payment	
	contingent and unliquidated claims	s of every nature. includin	a counterclaims of	the debtor and rights to	set off claims
■ No	Describe each claim	•		Ç	
	nancial assets you did not already	list			
■ No □ Yes.	Give specific information				
	the dollar value of all of your entrie art 4. Write that number here	•		s you have attached	\$6,012.00
Part 5: De	escribe Any Business-Related Property	You Own or Have an Interest	In. List any real estate	e in Part 1.	
■ No. G	own or have any legal or equitable inter o to Part 6. Go to line 38.	est in any business-related p	roperty?		
	escribe Any Farm- and Commercial Fish you own or have an interest in farmland, lis		n or Have an Interest	ln.	
46. Do yo	u own or have any legal or equitabl	e interest in any farm- or	commercial fishing	-related property?	

Schedule A/B: Property

No. Go to Part 7. ☐ Yes. Go to line 47.

Page 15 of 53

Case number (if known) Document Debtor 1 Silvia A Orozco

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$183,000.00 Part 2: Total vehicles, line 5 \$17.500.00 57. Part 3: Total personal and household items, line 15 \$550.00 Part 4: Total financial assets, line 36 58. \$6,012.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$24,062.00 Copy personal property total \$24,062.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$207,062.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1 Silvia A Orozco First Name Middle Name Last Name
First Name Middle Name Last Name
Daltan C
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are	you claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	2004 Pontiac Grand Prix 80000 miles Car was awarded to ex-husband in	\$2,500.00	\$2,400.00		735 ILCS 5/12-1001(c)	
	divorce judgment, however it is still titled in debtor's name. Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
	2004 Pontiac Grand Prix 80000 miles Car was awarded to ex-husband in	\$2,500.00		\$100.00	735 ILCS 5/12-1001(b)	
	divorce judgment, however it is still titled in debtor's name. Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
	General items of household goods and furnishings	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Gerneral items of wearing apparel Line from Schedule A/B: 11.1	\$250.00		\$250.00	735 ILCS 5/12-1001(a)	
Line	Line from Generalic PAB.			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
	Line from Goriedate AVD. 10.1			100% of fair market value, up to any applicable statutory limit		

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 17 of 53
Case number (if known)

Depioi i	SIIVIA A OTOZCO					
	of description of the property and line on edule A/B that lists this property	Current value of the portion you own	he Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	ecking: PNC e from Schedule A/B: 17.1	\$456.00	•	\$456.00	735 ILCS 5/12-1001(b)	
LIII	e IIIIII Schedule AAB. 11.1			100% of fair market value, up to any applicable statutory limit		
	nsion: Aon Hewitt e from Schedule A/B: 21.1	\$2,506.00		\$2,506.00	735 ILCS 5/12-1006	
LIII	e IIIIII Schedule AVB. 21.1			100% of fair market value, up to any applicable statutory limit		
	I (k): Putnam e from Schedule A/B: 21.2	\$1,300.00		\$1,300.00	735 ILCS 5/12-1006	
Line	e nom schedule Adb. 21.2			100% of fair market value, up to any applicable statutory limit		
Rei	ntal deposit: World Investment Co	\$1,600.00		\$1,600.00	735 ILCS 5/12-1001(b)	
28 Riv	East Ave verside, IL 60546 e from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit		
	you claiming a homestead exemption bject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	ıt.)	
_		ad by the avamption w	:+h:n 1	215 days before you filed this sees		
	Yes. Did you acquire the property covered No	ou by the exemption w	iu III 1	,210 days before you filed this case	t.	
	☐ Yes					

		Document F	⊇aαe 18 ດ	of 53		
Fill in this informa	ation to identify you	ur case:				
Debtor 1	Silvia A Orozco	,				
	First Name		ast Name		-	
Debtor 2	First Name	Middle Name L	ast Name		-	
(Spouse if, filing)	First Name	Middle Name L	.ast mame			
United States Bank	cruptcy Court for the	: NORTHERN DISTRICT OF ILLIN	OIS			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
000 - 1 -	4005					
Official Form						
Schedule D	D: Creditors	s Who Have Claims Se	ecured	by Propert	у	12/15
is needed, copy the A number (if known).	Additional Page, fill it	If two married people are filing together, out, number the entries, and attach it to t				
	ave claims secured by	, , , ,				
☐ No. Check th	his box and submit t	his form to the court with your other sc	hedules. You	have nothing else t	to report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the credito		Column A	Column B	Column C
		s a particular claim, list the other creditors in ical order according to the creditor's name.	Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	· ·		value of collateral.	claim	If any
2.1 Chase Auto	<u> </u>	Describe the property that secures the	claim:	\$16,513.00	\$15,000.00	\$1,513.00
Creditor's Name		2015 Mazda 3 11000 miles				
Po Box 901	003	As of the date you file, the claim is: Che apply.	ck all that			
Ft Worth, T	X 76101	☐ Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mor	rtgage or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debt	=	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one of the☐ Check if this claim		☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
community debt		— Other (including a right to onset)				
Date debt was incur	Opened 3/28/15 Last Active 2/29/16	Last 4 digits of account number	0308			
2.2 Us Bank Ho	ome Mortgage	Describe the property that secures the	claim:	\$231,174.00	\$183,000.00	\$48,174.00
Creditor's Name	omo mortgago	4200 Deyo Ave Brookfield, IL 6		Ψ201,174.00	Ψ100,000.00	Ψ+0,114.00
		Cook County				
		In Foreclosure				
4801 Frede		As of the date you file, the claim is: Che apply.	ck all that			
Owensboro	•	☐ Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Who owes the dela	12 Chaok and	Disputed				
Who owes the debt	LE CHECK ONE.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as more car loan)	rtgage or secur	ed		
Debtor 2 only	tor 2 only		niolo liam)			
☐ Debtor 1 and Debt☐ At least one of the		☐ Statutory lien (such as tax lien, mecha☐ Judgment lien from a lawsuit	nics lien)			
		0 0 0 g 0 non nom a lawout				

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 19 of 53

Debtor 1 Silvia A O	rozco		Case number (if know)			
First Name	Middle Na	me Last Name				
☐ Check if this claim recommunity debt	elates to a	Other (including a right to offset)				
Date debt was incurred	Opened 5/06/11 Last Active 5/01/15	Last 4 digits of account number	5089			
	•	olumn A on this page. Write that number	here:	\$247,687.00		
If this is the last page Write that number her		the dollar value totals from all pages.		\$247,687.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0000 10 12100 000	Document	Page 20 of 53	Best Main
Fill in t	his information to identify your case			
Debtor	1 Silvia A Orozco			
Dobto	First Name	Middle Name	Last Name	
Debtor				
(Spouse i	f, filing) First Name	Middle Name	Last Name	
United	States Bankruptcy Court for the: N	ORTHERN DISTRICT OF ILL	INOIS	
Case n	umber			
(if known)				☐ Check if this is an
				amended filing
Officia	al Form 106E/F			
		Have Upageured 6	Claima	12/1E
	dule E/F: Creditors Who			12/15 NPRIORITY claims. List the other party to
Schedule eft. Atta	e D: Creditors Who Have Claims Secured ch the Continuation Page to this page. If d case number (if known).	by Property. If more space is no you have no information to repo	o not include any creditors with partially eeded, copy the Part you need, fill it out, ort in a Part, do not file that Part. On the	number the entries in the boxes on the
Part 1:	List All of Your PRIORITY Unsec	ured Claims		
1. Do	any creditors have priority unsecured cla	ims against you?		
	No. Go to Part 2.			
Part 2:	List All of Your NONPRIORITY U	nsecured Claims		
3. Do	any creditors have nonpriority unsecure	d claims against you?		
	No. You have nothing to report in this part.	Submit this form to the court with y	our other schedules.	
■ 、	Yes.			
uns	ecured claim, list the creditor separately for n one creditor holds a particular claim, list th	each claim. For each claim listed,	e creditor who holds each claim. If a credi identify what type of claim it is. Do not list cl ave more than three nonpriority unsecured of	laims already included in Part 1. If more
				Total claim
4.1	Adventist Lagrange Memorial I	losp Last 4 digits of acco	ount number	\$150.00
	Nonpriority Creditor's Name	. _		
	PO Box 3495 Toledo, OH 43607	When was the debt i	incurred? 05/2015	
	Number Street City State Zlp Code	As of the date you fi	le, the claim is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORI	TY unsecured claim:	
	☐ Check if this claim is for a communi			
	debt	☐ Obligations arising	g out of a separation agreement or divorce t	hat you did not
	Is the claim subject to offset?	report as priority claim		
	No	•	or profit-sharing plans, and other similar deb	ots
	Yes	Other. Specify	<u>ledical</u>	

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 21 of 53

Debtor 1 Silvia A Orozco Case number (if know) 4.2 \$5,381.91 **ARS National Services Inc** Last 4 digits of account number 6289 Nonpriority Creditor's Name PO Box 469046 When was the debt incurred? 05/2015 Oaks, PA 19456 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections/Wamu Chase Bank ☐ Yes 4.3 **Atg Credit** Last 4 digits of account number 3435 \$51.00 Nonpriority Creditor's Name Opened 9/15/15 Last Active 1700 W Cortland St Ste 2 When was the debt incurred? 5/01/13 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Winfield Radiology C ☐ Yes Other, Specify 4.4 **Cadence Health** \$1,095.00 Last 4 digits of account number 9879 Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? 06/2013 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medical

Page 22 of 53 Case number (if know) Document Debtor 1 Silvia A Orozco 4.5 \$2,357.00 Capital One Last 4 digits of account number 6323 Nonpriority Creditor's Name Opened 4/26/00 Last Active Pob 30281 When was the debt incurred? 12/01/15 Salt Lake City, UT 84130 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 Capital One Bank Usa N Last 4 digits of account number 9704 \$2,593.00 Nonpriority Creditor's Name Opened 11/29/01 Last Active 15000 Capital One Dr When was the debt incurred? 6/01/14 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.7 Central Dupage Hospital Last 4 digits of account number 5350 \$1.700.00 Nonpriority Creditor's Name 25 North Winfield Road 04/2015 When was the debt incurred? Winfield, IL 60190 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No ☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Medical

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Page 23 of 53 Document Debtor 1 Silvia A Orozco Case number (if know) 4.8 \$5,381.00 **Chase Card** Last 4 digits of account number 6289 Nonpriority Creditor's Name Opened 12/07/98 Last Active Po Box 15298 When was the debt incurred? 1/01/14 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.9 **Chase Card** Last 4 digits of account number 1053 \$921.00 Nonpriority Creditor's Name Opened 5/26/01 Last Active Po Box 15298 When was the debt incurred? 2/01/14 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 **DuPage Eye Anesthesiology** 8562 \$331.16 Last 4 digits of account number Nonpriority Creditor's Name 2015 North Main Street When was the debt incurred? 04/2011 Wheaton, IL 60187 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Medical

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Entered 04/08/16 20:18:24 Case 16-12135 Doc 1 Filed 04/08/16 Desc Main

Document Page 24 of 53 Debtor 1 Silvia A Orozco Case number (if know) 4.1 **Enhanced Recovery Company** 7630 \$2,998.33 Last 4 digits of account number Nonpriority Creditor's Name PO Box 23870 0563 When was the debt incurred? Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections/Walmart MC ☐ Yes 4.1 **Health Care Clinics** \$20.00 Last 4 digits of account number Nonpriority Creditor's Name 200 Wilmot Rd When was the debt incurred? 12/2015 Deerfield, IL 60015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.1 Lovola Medicine 8460 \$150.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3021 When was the debt incurred? 05/03/2015 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

Document Page 25 of 53 Debtor 1 Silvia A Orozco Case number (if know) 4.1 Medicredit, Inc 8026 \$150.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 6/08/15 Last Active Po Box 1629 When was the debt incurred? 1/01/15 Maryland Heights, MO 63043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Loyola University He ☐ Yes 4.1 **Merchants Credit Guide** 1456 \$549.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 4/24/13 Last Active 223 W Jackson Blvd Ste 4 When was the debt incurred? 11/01/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Wheaton Eye Clinic ☐ Yes 4 1 **Merchants Credit Guide** 0752 \$430.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 9/25/13 Last Active 223 W Jackson Blvd Ste 4 When was the debt incurred? 12/01/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

☐ Yes

debt

■ No

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

■ Other. Specify Collection Attorney Dupage Eye Surgery C

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 26 of 53 Debtor 1 Silvia A Orozco Case number (if know) 4.1 \$284.00 **Merchants Credit Guide** 0019 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/23/11 Last Active 223 W Jackson Blvd Ste 4 When was the debt incurred? 1/17/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Central Dupage Physi ☐ Yes 4.1 **Merchants Credit Guide** 0781 \$77.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 9/25/13 Last Active 223 W Jackson Blvd Ste 4 When was the debt incurred? 12/01/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Dupage Eye Anesthesi** Other, Specify 4 1 MRS Associates of NJ 0029 \$5,381.91 Last 4 digits of account number Nonpriority Creditor's Name 1930 Olney Ave When was the debt incurred? 09/2015 Cherry Hill, NJ 08003 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collections/Chase Bank

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 27 of 53 Case number (if know) Document Debtor 1 Silvia A Orozco 4.2 **Portfolio Recovery Ass** 5754 \$960.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 12/20/14 Last Active 120 Corporate Blvd Ste 1 When was the debt incurred? 5/01/14 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank 4.2 Syncb/Walmart Dc 0563 \$2,998.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/27/10 Last Active Po Box 965024 When was the debt incurred? 12/06/13 Orlando, FL 32896 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 Vision Fitness \$20.00 Last 4 digits of account number Nonpriority Creditor's Name 715 W Hillgrove Av When was the debt incurred? 03/2015 La Grange, IL 60525 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Medical

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Page 28 of 53 Case number (if know) Document Debtor 1 Silvia A Orozco

Winfield Radiology Consultants	Last 4 digits of account number	\$51.
Nonpriority Creditor's Name 25 N Winfield Rd Winfield, IL 60190	When was the debt incurred? 04/2015	_
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	_
World Investment Co	Last 4 digits of account number	\$1,600.
Nonpriority Creditor's Name 28 East Ave	When was the debt incurred? 08/2015	
Riverside, IL 60546	When was the dept incurred?	_
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	■ Other. Specify Remaining lease term	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total	6f.	Student loans	6f.	\$ Total Claim 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00

Entered 04/08/16 20:18:24 Desc Main Case 16-12135 Doc 1 Filed 04/08/16 Page 29 of 53 Case number (if know) Document

Debtor 1 Silvia A Orozco

6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 35,630.69

Total Nonpriority. Add lines 6f through 6i.

Fill in this infor	mation to identify your	case:		
Debtor 1	Silvia A Orozco			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is ar
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 World Investment Co 28 East Ave Riverside, IL 60546	1 year lease for 8544 Bonkfield Ave Apt 1B Bronkfield Ave 60513 \$1600 Security Deposit

		Docume	ent Page 31 d	ot 53	
Fill in this	information to identify your	case:			
Debtor 1	Silvia A Orozco				
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	hor				
(if known)	Dei				☐ Check if this is an
					amended filing
					-
Official	l Form 106H				
Sched	lule H: Your Cod	ehtors			12/15
Julieu	idle II. Toul Cou	CDIOIS			12/15
■ No □ Yes 2. With Arizon ■ No.	you have any codebtors? (If hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. b. Did your spouse, former spo	ı lived in a community pr , Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Wash	ry? (Community propert	y states and territories include
in line Form out Co	2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	Column 2: The cre Check all schedule	
3.1				Schedule D, line	e
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street City	State	ZIP Code		
3.2	Nome			Schedule D, line	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
7	Number Street			_	
	City	State	ZIP Code		

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 32 of 53

Fill	in this information to identify your c	ase:					
Del	otor 1 Silvia A Oro	zco					
	otor 2						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS				
Case number (If known)			-				
	fficial Form 106l			Ī	MM / DD/ Y	YYY	
S	chedule I: Your Inc	ome					12/15
sup spo atta	as complete and accurate as posi- plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spouse is lith you, do not include informa	living with	n you, incl it your spo	ude information ouse. If more sp	about your ace is needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	2 or non-filing s	pouse
	If you have more than one job,	Employment status	■ Employed	☐ Emple		loyed	
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not e	mployed	
	employers.	Occupation	Accounts Payable		-		
	Include part-time, seasonal, or self-employed work.	Employer's name	Headco				
	Occupation may include student or homemaker, if it applies.	Employer's address	2601 Parks Ave Broadview, IL 60155				
		How long employed to	here? 1.5 years		_		
Par	t 2: Give Details About Mor	nthly Income					
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for an	y line, writ	e \$0 in the	space. Include y	our non-filing
	u or your non-filing spouse have mees space, attach a separate sheet to		ombine the information for all em	ployers fo	r that perso	on on the lines be	low. If you need
				For De	ebtor 1	For Debtor 2 non-filing sp	
2.	List monthly gross wages, sala deductions). If not paid monthly,			\$	2,480.00	\$	N/A
3.	Estimate and list monthly overt	ime pay.	3. +	\$	0.00	+\$	N/A

2,480.00

N/A

Calculate gross Income. Add line 2 + line 3.

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 33 of 53

Deb	otor 1	Silvia A Orozco	-	Case	number (<i>if kno</i> v	vn)				
				For	Debtor 1			ebtor 2 or iling spou		
	Cop	y line 4 here	4.	\$	2,480.0	00	\$		N/A	
5.	List	all payroll deductions:								
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	400.0	10	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.0		\$		V/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	87.0		\$		V/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.0		\$		V/A	
	5e.	Insurance	5e.	\$_	162.0		\$		V/A	
	5f.	Domestic support obligations	5f.	\$	0.0		\$		V/A	
	5g.	Union dues	5g.	\$	0.0		\$		V/A	
	5h.	Other deductions. Specify:	5h.+	\$_	0.0		+ \$		V/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	649.0		\$		N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	* — \$	1,831.0		\$		N/A	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	••		1,001.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Ψ	•	W/A	
		monthly net income.	8a.	\$	0.0	00	\$		N/A	
	8b.	Interest and dividends	8b.	\$_	0.0		\$		V/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.0		\$		N/A	
	8d.	Unemployment compensation	8d.	\$_	0.0		\$		V/A	
	8e.	Social Security	8e.	\$_	0.0		\$		V/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.0		\$		N/A	
	8g.	Pension or retirement income	8g.	\$	0.0		\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.0	00	+ \$	l	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.0	00	\$		N/A	
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$		1,831.00 +	\$		N/A = \$;	1,831.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ľ		1,001100					1,001100
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen					hedule J. 11. +\$		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12. \$		1,831.00
									mbine	
13.		you expect an increase or decrease within the year after you file this form	?					mo	nthly	income
		Yes. Explain:								

Schedule I: Your Income

page 2

Official Form 106I

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 34 of 53

	in this information to identify your ages.		İ		
	in this information to identify your case:				
Deb	Silvia A Orozco			t if this is:	
Deb	otor 2		_	An amended filing A supplement shov	ving postpetition chapter
(Spc	ouse, if filing)				the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	INOIS		MM / DD / YYYY	
Cas	se number				
(lf kı	known)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be a	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to thi mber (if known). Answer every question.				
Par	rt 1: Describe Your Household Is this a joint case?				
••	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	ses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		22	■ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include ■ No				— 103
	expenses of people other than				
	yourself and your dependents?				
Est exp	tt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a suplicable date.				
the	clude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> . Ifficial Form 106I.)			Your expo	enses
•	•				
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	e 4. \$		800.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as I 	homo oquity loops	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your residence, SUCN as I	HOTHE EQUITY TORNS	ე. ა		U.UU

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 35 of 53

Debtor 1 Silvia A Orozco	Case number (if known)	
5. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	180.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	125.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	400.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	50.00
Personal care products and services	10. \$	50.00
. Medical and dental expenses	11. \$	0.00
Transportation. Include gas, maintenance, bus or train fare.	12. \$	200.00
Do not include car payments.		
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
. Charitable contributions and religious donations	14. \$	0.00
. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.	45 ^	.
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	100.00
15d. Other insurance. Specify:	15d. \$	0.00
. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 2	20.	
Specify:	16. \$	0.00
Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not re		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form). Other payments you make to support others who do not live with you.	\$	0.00
Specify:	Ψ 19.	0.00
Other real property expenses not included in lines 4 or 5 of this form or o		
20a. Mortgages on other property	20a. \$	0.00
	· —	
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
. Other: Specify:	21. +\$	0.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	1,905.00
<u> </u>		1,905.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form		
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,905.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,831.00
23b. Copy your monthly expenses from line 22c above.	23b\$	1,905.00
200. Copy your monthly expenses non-line 220 above.		1,303.00
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	-74.00
, ,	-	
Do you expect an increase or decrease in your expenses within the year		
For example, do you expect to finish paying for your car loan within the year or do you ex	pect your mortgage payment to incre	ease or decrease because
modification to the terms of your mortgage?		
■ No.		
☐ Yes. Explain here:		

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 36 of 53

=111.1.1.1.1					
Fill in this infor	mation to identify your	case:			
Debtor 1	Silvia A Orozco	Middle Name	Last Name		
Debtor 2	Tilstivalle	Wildlie Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an
					amended filing
Official Form		an Individual	Debtor's Sc	hedules	12/15
If two married po	eople are filing togethe	r, both are equally respo	nsible for supplying cor	rect information.	
obtaining money		n connection with a bank			ment, concealing property, or), or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	eone who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				ruptcy Petition Preparer's Notice,
				Declaration,	and Signature (Official Form 119)
	alty of perjury, I declare true and correct.	that I have read the sum	nmary and schedules file	d with this declaratior	n and
X /s/ Silv	via A Orozco		X		
	A Orozco re of Debtor 1		Signature of	Debtor 2	

Date _____

Date **April 8, 2016**

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 37 of 53

Fill	in this inform	ation to identify you	r case:			
	otor 1	Silvia A Orozco				
50.	3.01	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
		kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number					Check if this is an mended filing
Sta		of Financial	Affairs for Individable in the state of the		ankruptcy	4/10
info	rmation. If me		attach a separate sheet to		y additional pages, write you	
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explain	n the Sources of You	r Income			
4.	Fill in the total	I amount of income yo	nployment or from operating used income all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,680.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Page 38 of 53
Case number (if known) Document

Debtor 1 Silvia A Orozco

				Debtor 1					Debtor 2		
				Sources of Check all th		(befo	ss income ore deductions a usions)	and	Sources of inconcern Check all that approximately		Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 3	31, 2015)	■ Wages, bonuses, tip	commissions,		\$26,438	3.00	☐ Wages, combonuses, tips	missions,	
				☐ Operatir	ng a business				☐ Operating a l	business	
		dar year bef December 3		■ Wages, bonuses, tip	commissions,		\$54,274	4.00	☐ Wages, combonuses, tips	missions,	
				☐ Operatir	ng a business				☐ Operating a I	ousiness	
	winnings. List each:	lf you are filir	ng a joint cas	e and you ha	ive income that y	ou rece	eived together,	list it on	ed from lawsuits; ly once under De at you listed in lin	btor 1.	I gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe be		each (befo	ss income from a source ore deductions a usions)		Sources of inco Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	Certain Pay	ments You	Made Before	e You Filed for E	Bankru	ptcy				
6.	□ No.	Neither De individual puring the Subject to Debtor 1 o	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e	re you filed for a character of the char	mily, or household or bankruptcy, diction whom you paid it include paymen an attorney for the and every 3 years primarily consular or bankruptcy, diction whom you paid	d a total d you pa d a total d safter the mer de d you pa	ebts. Consumer ose." ay any creditor I of \$6,425* or romestic supportruptcy case, hat for cases filled by any creditor I of \$600 or mo	a total of more in the color of	of \$6,425* or more pay tions, such as ch r after the date of of \$600 or more?	e? ments and th ild support ar f adjustment. you paid that	
				ments for dor this bankrup		oligatior	ns, such as chil	d suppo	ort and alimony. Å	Also, do not ir	nclude payments to an
	Creditor	s Name and	Address	1	Dates of paymer	nt	Total amou	ınt aid	Amount you still owe	Was this p	ayment for

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document

Page 39 of 53
Case number (if known) Debtor 1 Silvia A Orozco

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No						
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an	
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name	
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case	
	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?	
	Creditor Name and Address	Describe the Property		Date		Value of the property	
		Explain what happened	i			property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details.	ause you owed a debt?					
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes		erty in the possess			efit of creditors, a	
Pai	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24

Page 40 of 53 Document ase number (if known) Debtor 1 Silvia A Orozco 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You **VLO PC** 03/23/2016 \$999.00 3818 S Harlem Lyons, IL 60534 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred payment or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Case 16-12135 Page 41 of 53
Case number (if known) Document

Debtor 1 Silvia A Orozco

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made	
Pa	tt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Unit	s		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accour	nts; certificates	s of deposi	•	•	
	Name of Financial Institution and L	ast 4 digits of ccount number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing o transfe	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe dep	oosit box or other depo	sitory for securities,	
	■ No ■ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or p ■ No □ Yes. Fill in the details.	place other than your	home within 1	year befor	e you filed for bankrup	tcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?	
Pa	rt 9: Identify Property You Hold or Control for	r Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any proper	ty you bori	owed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
	the purpose of Part 10, the following definitions						
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these si	air, land, soil, surface	e water, ground	• .			
	Site means any location, facility, or property at to own, operate, or utilize it, including disposa	s defined under any e		law, wheth	er you now own, opera	te, or utilize it or used	
	Hazardous material means anything an enviro		as a hazardous	s waste, ha	zardous substance, to	cic substance,	

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Page 42 of 53 Case number (if known) Document

Debtor 1 Silvia A Orozco

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the deta	nils.					
	Name of site Address (Number, Street, C	city, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		onmental law, if you it	Date of notice	
25.	Have you notified any g	overnmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the deta	ils.					
	Name of site Address (Number, Street, C	city, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	_	onmental law, if you it	Date of notice	
26.	Have you been a party i	n any judicial or admi	inistrative proceeding under any envi	ironmental	law? Include settlements a	and orders.	
	■ No □ Yes. Fill in the deta	ils.					
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case	
Par	t 11: Give Details Abou	ut Your Business or C	onnections to Any Business				
27.	Within 4 years before ye	ou filed for bankruptc	y, did you own a business or have ar	ny of the fo	llowing connections to any	business?	
	☐ A sole proprieto	or or self-employed in	a trade, profession, or other activity,	either full-	time or part-time		
	☐ A member of a l	imited liability compa	ny (LLC) or limited liability partnersh	ip (LLP)			
	☐ A partner in a pa	artnership					
	☐ An officer, direc	tor, or managing exe	cutive of a corporation				
	☐ An owner of at l	east 5% of the voting	or equity securities of a corporation				
	No. None of the ab	ove applies. Go to Pa	art 12.				
	☐ Yes. Check all that	apply above and fill i	n the details below for each business	S.			
	Business Name		Describe the nature of the business		loyer Identification number		
		Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed					
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	■ No □ Yes. Fill in the details below.						
	Name Date Issued						
	Address (Number, Street, City, State an						

Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Case 16-12135 Page 43 of 53
Case number (if known) Document

Debtor 1 Silvia A Orozco

are true and correct. I understand that	ent of Financial Affairs and any attachments, and I declare under penalty on the statement, concealing property, or obtaining money or property to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Silvia A Orozco		
Silvia A Orozco	Signature of Debtor 2	
Signature of Debtor 1		
Date April 8, 2016	Date	
Did you attach additional pages to Yo	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Offic	ial Form 107)?
■ No		•
□Yes		

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

■ No

connection

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 44 of 53

			· ·	
Fill in this infor	mation to identify your	case:		
Debtor 1	Silvia A Orozco First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under C	napter 7 12/15
	lividual filing under cha e claims secured by yo	-	Il out this form if:	
You must file th	ever is earlier, unless th	ithin 30 days after	not expired. r you file your bankruptcy petition or by th ne time for cause. You must also send cop	
	eople are filing together	in a joint case, bo	oth are equally responsible for supplying	correct information. Both debtors must
Be as complete write y		nber (if known).	s needed, attach a separate sheet to this	orm. On the top of any additional pages,
1. For any credi		rt 1 of Schedule [D: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
	reditor and the property the	nat is collateral	What do you intend to do with the prop secures a debt?	perty that Did you claim the property as exempt on Schedule C?
Creditor's (Chase Auto		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	f 2015 Mazda 3 1100	0 miles	Retain the property and enter into a Reaffirmation Agreement.Retain the property and [explain]:	■ Yes
securing debt	: 			
	Js Bank Home Mortg	age	☐ Surrender the property.	□ No
Description of			☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	60513 Cook Coun in Foreclosure	sy .	Retain the property and [explain]: Loan Mod	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 45 of 53

Det	otor 1	Silvia A O	rozco	Case number (if known)	
Les	sor's na	ame:	World Investment Co		■ No
					☐ Yes
	scription perty:	n of leased	1 year lease for 8544 Bonk \$1600 Security Deposit	field Ave Apt 1B Bronkfield Ave 60513	
Par	t 3:	Sign Below			
			ry, I declare that I have indicate t to an unexpired lease.	d my intention about any property of my estate that see	cures a debt and any personal
Χ	/s/ Si	Ivia A Oro	zco	X	
	Silvia A Orozco)	Signature of Debtor 2	
	Signa	ture of Debto	or 1		
	Date	April 8	3, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-12135 Doc 1 Filed 04/08/16 Entered 04/08/16 20:18:24 Desc Main Document Page 50 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	n re Silvia A Orozco		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	IPENSATION OF ATTOR	RNEY FOR D	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy,	or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		\$	999.00	
	Prior to the filing of this statement I have rece			999.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed	compensation with any other person u	unless they are me	mbers and associates	s of my law firm.
	☐ I have agreed to share the above-disclosed concopy of the agreement, together with a list of the				y law firm. A
5.	In return for the above-disclosed fee, I have agreed	d to render legal service for all aspects	s of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of c d. Representation of the debtor in adversary proces e. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applitions of the secured creditors and applitions of the secured creditors and applitications. 	s, statement of affairs and plan which creditors and confirmation hearing, an edings and other contested bankrupto s to reduce to market value; executions as needed; preparation	may be required; d any adjourned he y matters; mption planning	earings thereof;	d filing of
5.	By agreement with the debtor(s), the above-disclos	sed fee does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement is bankruptcy proceeding.	of any agreement or arrangement for	payment to me for	representation of th	e debtor(s) in
	April 8, 2016	/s/ Rayed Yasin			
	Date	Rayed Yasin			
		Signature of Attorney VLO, P.C.	y		
		3818 S. Harlem Av	ve.		
		Lyons, IL 60534			
		3126007000 Fax:	7087771638		
		Name of law firms			

United States Bankruptcy Court Northern District of Illinois

In re	Silvia A Orozco		Case No.	
		Debtor(s)	Chapter 7	
	V	ERIFICATION OF CREDITOR M	MATRIX	
		Number of Creditors: 22		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	April 8, 2016	/s/ Silvia A Orozco		

Adventist Lagrange Memorial Hosp PO Box 3495 Toledo, OH 43607

ARS National Services Inc PO Box 469046 Oaks, PA 19456

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

Cadence Health PO Box 4090 Carol Stream, IL 60197

Capital One Pob 30281 Salt Lake City, UT 84130

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190

Chase Auto Po Box 901003 Ft Worth, TX 76101

Chase Card Po Box 15298 Wilmington, DE 19850

DuPage Eye Anesthesiology 2015 North Main Street Wheaton, IL 60187

Enhanced Recovery Company PO Box 23870 Jacksonville, FL 32241

Health Care Clinics 200 Wilmot Rd Deerfield, IL 60015

Loyola Medicine PO Box 3021 Milwaukee, WI 53201

Medicredit, Inc Po Box 1629 Maryland Heights, MO 63043

Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606

MRS Associates of NJ 1930 Olney Ave Cherry Hill, NJ 08003

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Syncb/Walmart Dc Po Box 965024 Orlando, FL 32896

Us Bank Home Mortgage 4801 Frederica St Owensboro, KY 42301

Vision Fitness 715 W Hillgrove Av La Grange, IL 60525

Winfield Radiology Consultants 25 N Winfield Rd Winfield, IL 60190

World Investment Co 28 East Ave Riverside, IL 60546